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PROVIDER BULLETIN

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THIS ISSUE

Hyaluronic Acid in Treatment of Osteoarthritis of the Knee

TO:

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Purpose

This bulletin describes the use of Hyaluronic acid for osteoarthritis of the knee and clarifies when the Insurer (State Fund and Self-Insurer), may approve the use of the product.

This policy covers services for State Fund and Self-Insured worker's compensation patients for dates of service on or after January 1, 1999.

What is Hyaluronic acid?

Hyaluronic acid, a complex sugar chain substance with viscous properties, has been approved as a device by the Food and Drug Administration for the treatment of osteoarthritis of the knee. To date, the device is marketed under the trade names Hyalgan and Synvisc.

Cartilage in the knee normally provides a cushion between the bones to allow the joint to move smoothly. Hyaluronic acid is naturally produced by the body and lubricates cartilage within the joint. With osteoarthritis, the cartilage and other structures of the joint begin to break down. In some patients, a small amount of inflammation breaks down the hyaluronic acid so that lubrication is lost, joints become stiff, and movement is painful. Hyaluronic acid injections replace or supplement the body's natural Hyaluronic acid that is broken down by inflammation.

For what conditions is Hyaluronic Acid indicated?

Hyaluronic acid is indicated for the treatment of knee pain caused by osteoarthritis, in patients who have failed to respond adequately to conservative nonpharmacologic therapy and to simple analgesics (e.g. acetaminophen).

Though pain relief, from 6 – 12 months, is the primary purpose of this therapy, a secondary goal is to delay or prevent a total knee replacement for the injured worker.

Hyaluronic acid injections are *indicated only for osteoarthritis of the knee*. Other uses are considered experimental, and therefore *will not be payable*. WAC 296-20-03002(6).

How is Hyaluronic Acid administered?

Hyaluronic acid is administered by intra-articular injection on an outpatient basis. The schedule of injections varies with the FDA-approved product used. One course of the currently approved products consists of:

1. Hyalgan: administered by intra-articular injection once a week (1 week apart), for a total of five injections, or
2. Synvisc: administered by intra-articular injection once a week (1 week apart), for a total of three injections.

When will Insurer pay for the use of Hyaluronic acid?

When osteoarthritis is the accepted condition or is retarding recovery from an accepted condition, one course of Hyaluronic acid may be considered medically necessary.

The requesting provider must provide the insurer with documentation of the existence of osteoarthritis of the knee and that the patient has failed to benefit from or is unable to tolerate all of the following therapies recommended by the American College of Rheumatology:

- A. Non-pharmacological therapies (e.g., physical therapy),
- B. Non-opioid analgesics (e.g., acetaminophen), and
- C. Treatment with NSAID's. Intolerance (e.g., rash, gastropathy, etc.) and therapeutic failure must be documented with at least a one-week trial of two formulary products from different NSAID's classes.

If Osteoarthritis is retarding recovery from accepted condition, what additional information must be supplied to the insurer?

In addition to the requirements detailed above, if osteoarthritis is *retarding recovery* of the accepted medical condition, temporary treatment may be authorized when all of the following requirements are met, and are documented to the insurer:

1. The occupational disease or industrial injury is not stable.
2. Osteoarthritis is directly retarding recovery of the accepted occupational or industrial injury, and
3. The required documentation is submitted (see above).

See WAC 296-20-055 for temporary treatment of unrelated conditions retarding recovery.

Is Prior Authorization Required?

Prior authorization is required whether the osteoarthritis is an unrelated condition retarding recovery from an accepted medical condition or is the accepted medical condition.

See above for specific information that must be submitted to insurer.

Will the Insurer pay for additional courses of Hyaluronic acid?

Under rare circumstances the insurer will pay for an additional course of Hyaluronic acid treatment. Additional courses of Hyaluronic acid may be considered ***only when osteoarthritis is the accepted medical condition***, not when it is the condition retarding recovery.

In order for additional courses of Hyaluronic acid injections to be considered medically necessary:

- A. Provider must request prior authorization in writing, and
- B. The request must include documentation of return of pain complaints and evidence of functional improvement for the patient who has undergone a prior course of treatment.

What are the limits and how do I bill for the use of Hyaluronic Acid?

A provider may only bill the insurer for the use of Hyaluronic acid at a frequency of one service unit per day per knee with the codes listed below:

Hyalgan: (3020A)

- A. The treatment protocol for Hyalgan is a series of five injections at one week intervals. Therefore, a provider may bill the insurer one service unit per day per knee up to five times.
- B. Each service unit will pay \$165.23 that includes both the drug cost and injection procedure.

Synvisc: (3040B)

- A. The treatment protocol for Synvisc is a series of three injections at one week intervals. Therefore, a provider may bill the insurer one service unit per day per knee up to three times.
- B. Each service unit will pay \$221.90 that includes both the drug cost and injection procedure.

Modifier:

- A side of body modifier is required on the bill and in authorization for the procedure.
- The correct modifiers are -RT (for right knee) and -LT (for left knee).
- If a bilateral procedure is performed, then one code should be billed for each side.

A service unit includes both the costs of the drug and the injection procedure.